

# State of Washington Application for a Water Right Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use	
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Date	

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Section 3	. STAT	EMENT	OF INT	ENT				
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"See	Page 4"	nual quantity	y to be used	l in acre-feet	per year:			
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**APPLICATION** 

ECY 040-1-14 Rev. 12/94 F

Appl. No.: 62-29887

A.	Name of system, if named:Firgrove Water System
В.	Briefly describe your proposed water system. (See instructions.) Well #22 will be equipped with a single 100 HP submersible well pump which will pump directly to 517,000 gallons of ground level storage. Booster pumps will draw from this storage to assist other Firgrove pumping facilities in satisfying the domestic and municipal needs of the customers in Zone #2 of a predominatly 3-Zone gravity water supply system.
C.	Do you already have any water rights or claims associated with this property or system?  ☐ YES ☐ NO PROVIDE DOCUMENTATION. See Ground Water Permit No. G2-29346-P
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION completed for all domestic/public supply uses.)
Α.	Number of "connections" requested: 1450 Type of connection Homes (ERU's)
В.	Are you within the area of an approved water system?  If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.  N/A
Con	nplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health?  If yes, when was it approved? 12/04/95 Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan?  If yes, when was it approved?   2/99 water Sutem Please attach the current approved version of your plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION omplete for all irrigation and agriculture uses.)
Α.	Total number of acres to be irrigated:
B.	List total number of acres for other specified agricultural uses:
	Use Acres Use Acres Use Acres
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977)  Add up the acreage in which you have a controlling interest, including only:  ‡ Acreage irrigated under water rights acquired after December 8, 1977;  ‡ Acreage proposed to be irrigated under this application;  ‡ Acreage proposed to be irrigated under other pending application(s).
	<ol> <li>Is the combined acreage greater than 2000 acres?</li> <li>Do you have a controlling interest in a Family Farm Development Permit?</li> <li>If yes, enter permit no:</li> </ol>
E.	Farm uses:  Stockwater - Total # of animals Animal type (If dairy cattle, see below)  Dairy - # Milking # Non-milking

## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

N YES □ NO

□ YES X NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

From I-5 go east on Hwy 512 toward Puyallup exiting at 94th Ave. Turn right going south on 94th Ave. to 144th St. Turn right going west on 144th St. to 80th Ave CT E. Turn right on 80th Ave CT E. Well #22 is located just north of water storage tank visible on the left (west) side of street. Facility is locked. Call ahead for access. Firgrove Mutual, Inc. at (253) 845-1542

## Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

See attached sheet 1 of 6 of Construction Plans dated July 12, 1999.

#### Section 11. PROPERTY OWNERSHIP

Does the applicant own the land on which the water will be used?

	If no, explain the applicant's interest in the place of use and owner(s):	provide the name(s) and address(es) of the
	Water Purveyor	
		a a
В.	Does the applicant own the land on which the water source is If no, submit a copy of agreement:	s located? NO YES - NO
order t and mo the emp me.	by that the information above is true and accurate to the best oprocess my application, I grant staff from the Department on itoring purposes. Even though I may have been assisted ployees of the Department of Ecology, all responsibility for the Wieneke, Manager	nt of Ecology access to the site for inspection in the preparation of the above application by
Applica	Ant (or authorized representative)	11-4-99 Date
	Same	
Landow	vner for place of use (if same as applicant, write "same")	Date
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Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

Place	of	Use	:

Area served by the Firgrove Water System, State ID #25200M, including all interties, as said system is situated in Pierce County and described in an approved Water System Plan.

Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98503-0210
Section number(s)is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:  Please provide the additional information requested above and return your	application by
	application by

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).